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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/500,930			ing Date 19/2 00 5	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛				HER THAN ALL ENTITY
FOR			NUMBER FI	LED N	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		N/A]	N/A	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A		N/A]	N/A	
	EXAMINATION FE (37 CFR 1.16(a), (p),		N/A		N/A		N/A]	N/A	
TO (37	TAL CLAIMS CFR 1.16(i))		minus 20 = *				x \$ =		OR	x s =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 = *			1	x \$ =		1	x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sh	ets of pap \$250 (\$125 ditional 50	ngs exceed 100 on size fee due) for each on thereof, See ' CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))]]		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		J	TOTAL	
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMAL	L ENTITY	OR		ER THAN ALL ENTITY
AMENDMENT	06/29/2009	CLAIMS REMAINING AFTER AMENDMEN	г	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	• 27	Minus	 27	= 0]	X \$26 =	0	OR	x s =	
	Independent (37 CFR 1.16(h))	• 3	Minus	***3	= 0	1	X \$110 =	0	OR	x s =	
	Application Size Fee (37 CFR 1.16(s))										
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
L		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
Ä	Total (37 CFR 1,16(i))	*	Minus	**	=]	x \$ =		OR	x s =	
Σ	Independent (37 CFR 1.16(h))	*	Minus	***]	x \$ =		OR	x \$ =	
AMENDMENT	Application Size Fee (37 CFR 1.16(s))					Į			1		
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						TOTAL		OR		
									OR	TOTAL ADD'L FEE	
"If the entry in column 1 is less than the entry in column 2, write "or in column 3. Legal Instrument Examiner." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total Instrument is the highest number or out of the appropriate box in column 1. The "Highest Number Previously Paid For" (Total Instrument is previously Paid For" (Total Instrument I											

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